

**CALIFORNIA FORM 700**FAIR POLITICAL PRACTICES COMMISSION  
A PUBLIC DOCUMENT**STATEMENT OF ECONOMIC INTERESTS**Date Received  
Official Use Only**COVER PAGE**

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Please type or print in ink.

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Murillo, Cathy			

**1. Office, Agency, or Court**

Agency Name

CITY OF SANTA BARBARA

Division, Board, Department, District, if applicable

Your Position

Mayor and Council Office

Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

- |  |   |
|--|---|
| <input type="checkbox"/> State                                   | <input type="checkbox"/> Judge or Court Commissioner (Statewide Jurisdiction) |
| <input type="checkbox"/> Multi-County _____                      | <input type="checkbox"/> County of _____                                      |
| <input checked="" type="checkbox"/> City of <u>Santa Barbara</u> | <input type="checkbox"/> Other _____  |

**3. Type of Statement (Check at least one box)**

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> <b>Annual:</b> The period covered is January 1, 2012, through December 31, 2012 | <input type="checkbox"/> <b>Leaving Office:</b> Date Left ____/____/____<br>(Check one)          |
| -or-  | <input type="radio"/> The period covered is January 1, 2012, through the date of leaving office. |
| The period covered is ____/____/____, through December 31, 2012.  | <input type="radio"/> The period covered is ____/____/____, through the date of leaving office.  |
| <input type="checkbox"/> <b>Assuming Office:</b> Date assumed ____/____/____  |  |
| <input type="checkbox"/> <b>Candidate:</b> Election Year _____ and office sought, if different than Part 1: _____   |  |

**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

- |  |   |
|--|---|
| <input type="checkbox"/> <b>Schedule A-1 - Investments</b> - schedule attached | <input checked="" type="checkbox"/> <b>Schedule C - Income, Loans, &amp; Business Positions</b> - schedule attached |
| <input type="checkbox"/> <b>Schedule A-2 - Investments</b> - schedule attached | <input checked="" type="checkbox"/> <b>Schedule D - Income - Gifts</b> - schedule attached                          |
| <input type="checkbox"/> <b>Schedule B - Real Property</b> - schedule attached | <input type="checkbox"/> <b>Schedule E - Income - Gifts - Travel Payments</b> - schedule attached                   |

-or-

☐ **None - No reportable interests on any schedule**

5.

I have used all reasonable diligence in preparing this statement. I herein and in any attached schedules is true and complete. I ac

I certify under penalty of perjury under the laws of the State

Date Signed 03/18/2013  
(month, day, year)

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <u>Murillo, Cathy</u>

▶ **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

U.S. Department of the Interior

ADDRESS (Business Address Acceptable)

2800 Cottage Way  
Sacramento CA 95825

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

Staff Biologist

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary      ☒ Spouse's or registered domestic partner's income

☐ Loan repayment      ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Commission or      ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
(Describe)

▶ **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

City of Santa Barbara

ADDRESS (Business Address Acceptable)

735 Anacapa St.  
Santa Barbara CA 93101

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

City Council Member

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary      ☐ Spouse's or registered domestic partner's income

☐ Loan repayment      ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Commission or      ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
(Describe)

▶ **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000  
☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000  
☐ OVER \$100,000

INTEREST RATE

\_\_\_\_\_ %

☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None      ☐ Personal residence

☐ Real Property \_\_\_\_\_  
Street address

\_\_\_\_\_ City

☐ Guarantor \_\_\_\_\_

☐ Other \_\_\_\_\_  
(Describe)

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <u>Murillo, Cathy</u>
--

▶ NAME OF SOURCE (Not an Acronym)  
SB City Firefighters Association  
 ADDRESS (Business Address Acceptable)  
121 W. Carrillo St.  
Santa Barbara CA 93101  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10/18/12</u>	<u>\$ 75.00</u>	<u>registration fee for pension workshop</u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>

▶ NAME OF SOURCE (Not an Acronym)  
 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$</u>	<u>  </u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>

▶ NAME OF SOURCE (Not an Acronym)  
 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$</u>	<u>  </u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>
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<u>  /  /  </u>	<u>\$</u>	<u>  </u>
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<u>  /  /  </u>	<u>\$</u>	<u>  </u>

Comments: \_\_\_\_\_  
 \_\_\_\_\_